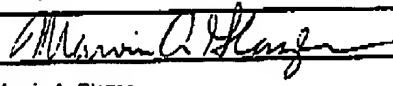


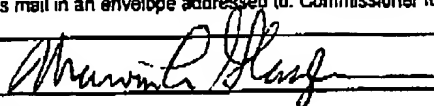
PTO/SB/21 (09-04)
Approved for use through 07/31/2006, OMB 0651-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/978,224	RECEIVED
	Filing Date	10/16/2001	CENTRAL FAX CENTER
	First Named Inventor	Reuben Escher	
	Art Unit	2413	JUN 29 2005
	Examiner Name	Bigrami, Asghar H.	
Total Number of Pages in This Submission	30	Attorney Docket Number	6889-A-7

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks Charge Deposit Account 03-0088 for necessary fees		RECEIVED OIPE/IAP JUN 30 2005

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Cahill, von Hellens & Glazer, P.L.C.		
Signature			
Printed name	Marvin A. Glazer		
Date	June 29, 2005	Reg. No.	25,801

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:	
Signature	
Typed or printed name	Marvin A. Glazer
Date	June 29, 2005

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PTO/SB/21 (09-04)

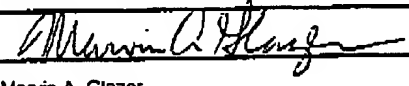
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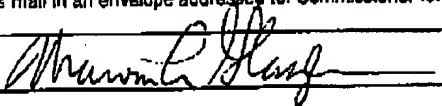
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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/978,224
	Filing Date	10/18/2001
	First Named Inventor	Reuben Bahar
	Art Unit	2413
	Examiner Name	Bligami, Asghar H.
	Attorney Docket Number	6569-A-7
Total Number of Pages in This Submission		30

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks Charge Deposit Account 03-0088 for necessary fees		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Cahill, von Hellens & Glazer, P.L.C.		
Signature			
Printed name	Marvin A. Glazer		
Date	June 29, 2005	Reg. No.	28,801

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Signature			
Typed or printed name	Marvin A. Glazer	Date	June 29, 2005

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4618).**FEE TRANSMITTAL**
For FY 2005☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 750.00

Complete If Known

Application Number 09/978,224
 Filing Date 10/06/2001
 First Named Inventor Reuben Bahar
 Examiner Name Bilgrami, Asghar H.
 Art Unit 2143
 Attorney Docket No. 56589-A-7

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JUN 29 2005

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☒ Other (please identify): Deposit Account
☒ Deposit Account Deposit Account Number: 03-0088 Deposit Account Name: Cahill von Hellellens
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
148	28	25	650.00

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
7	1	100	100.00

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

SUBMITTED BY

Signature	<i>Marvin A. Glazer</i>	Registration No. (Attorney/Agent) 28,801	Telephone (602) 956-7000
Name (Print/Type)	Marvin A. Glazer		Date June 29, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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JUN 29 2005

EXAMINER: BILGRAMI, ASGHAR H

APPLICANT: REUBEN BAHAR

Art Unit: 2143

SERIAL NO.: 9/978,224

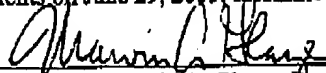
Confirmation No. 4472

FILED: 10/16/2001

Attorney Docket No. 6589-A-7

FOR: "METHOD AND SYSTEM FOR
CONFIRMING PROPER RECEIPT OF
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By: Marvin A. Glazer, Reg. No. 28,801

June 29, 2005
DateSUPPLEMENTAL AMENDMENTCommissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-145006/30/2005 SSITHIB1 00000181 030088 09978224
01 FC:2201 100.00 DA
02 FC:2202 650.00 DA

Sir:

In supplementation of Applicant's Amendment filed on June 16, 2005, which
Amendment was, in turn, responsive to the Office Action mailed January 13, 2005, please further
amend the above application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2
of this paper; for purposes of the current listing of the claims, prior claim amendments made in
the Amendment filed on June 16, 2005 are treated herein as if having already been entered.

Remarks/Arguments begin on page 27 of this paper.